

FINANCIAL AFFIDAVIT

CJA 23

IN SUPPORT OF REQUEST FOR ATTORNEY EXPENSE OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE REV. 1/90

IN UNITED STATES
IN THE CASE OF MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

J.S.

vs. Moses Pennic III

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Moses Pennic III

CHARGE/OFFENSE (describe if applicable & check box →)

 Felony
 Misdemeanor

- Defendant—Adult
- Defendant—Juvenile
- Appellant
- Probation Violator
- Parole Violator
- Habeas Petitioner
- 2255 Petitioner
- Material Witness
- Other (Specify) _____

DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

Z-06CR14-
W

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Am Self Employed
	Name and address of employer: 3432 Gilmer Court Penn - Road IF YES, how much do you earn per month? \$ 250
	IF NO, give month and year of last employment How much did you earn per month \$
ASSETS	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
	IF YES, how much does your Spouse earn per month \$
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No
	RECEIVED RECEIVED & IDENTIFY \$ _____ THE SOURCES _____
CASH	Have you any cash on hand or money in savings or checking account <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$
PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes
	IF YES, GIVE VALUE AND \$ DESCRIBE IT VALUE _____ DESCRIPTION _____ _____ _____

DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR <input type="checkbox"/> DIVORCED	Total No. of Dependents 1	List persons you actually support and your relationship to them Joselyne Pennic (daughter)
	APARTMENT OR HOME:	Creditors	Total Debt Monthly Payt. \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)		

I certify the above to be correct.

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Moses Pennic III

8 - 7 - 06

WARNING: A FALSE OR DISHONEST ANSWER TO A QUESTION IN THIS AFFIDAVIT MAY BE PUNISHABLE BY FINE OR
IMPRISONMENT, OR BOTH.

Under the penalty of perjury

26 U.S.C. § 1746